



Skin and Wound Product Information Sheet

Comprilan	
Classification	Compression Therapy: Non-Elastic/Short Stretch Wrap - Reusable
Key Points	<p>For Compression Therapy in general</p> <ul style="list-style-type: none"> • A physician/NP order or clinical direction from a Wound Clinician is required to apply a compression wrap • Only health care professionals who have successfully completed additional education for compression therapy may apply compression wraps • Follow agency/Health Authority compression therapy policies/practice standard • Refer to the Guideline: Application of Compression Therapy for further information related to indications, precautions and contraindications <p>For this product specifically</p> <ul style="list-style-type: none"> • A reusable inelastic/short-stretch wrap providing high compression (30-40mmHg) for up to 7 days • Non-compression stockinette and cast padding/open-celled foam eg Comprifoam may be used • Wrap can be washed and reused up to 10 times • The fastener clip contains latex and can cause trauma to the skin
Indications	<ul style="list-style-type: none"> • For clients who require high compression therapy for the treatment of <ul style="list-style-type: none"> ○ Venous insufficiency with or without ulcer(s) ○ Arterial/venous insufficiency with or without ulcer(s) ○ Lymphedema with or without ulcers(s) ○ Post Sclerotherapy
Precautions	<ul style="list-style-type: none"> • Compression wraps may be used: <ul style="list-style-type: none"> ○ Used with caution for clients whose ABI is between 0.50 and 0.89 as this value indicates moderate to mild arterial insufficiency ○ Used with caution and under an order from a Physician/NP for clients whose ABI is 1.31 or greater as this value indicates calcified arteries (often seen in clients with diabetes mellitus and/or with advanced small vessel disease) ○ Used with extreme caution and in consultation with a vascular surgeon for clients whose ABI is 0.49 or less as this value indicates very severe arterial insufficiency • Very thin legs/bony prominences need to be well padded to protect them from pressure • Promptly remove the wrap and notify the Physician/NP/Wound Clinician if the client develop pain or a pale, cool or numb toes or foot, or signs and symptoms of Heart Failure
Contraindications	<ul style="list-style-type: none"> • Do not use latex fastener clips; use tape to secure wrap as needed • Do not apply in the presence of uncontrolled Heart Failure • Do not apply in the presence of an untreated lower limb skin or wound infection
Formats & Sizes	<ul style="list-style-type: none"> • Compression Wrap <ul style="list-style-type: none"> ▪ 4 cm x 5 m ▪ 6 cm x 5 m ▪ 8 cm x 5 m ▪ 10 cm x 5 m ▪ 12 cm x 5 m ▪ 10 cm x 10 m ▪ 12 cm x 10 m <div style="text-align: right;">  </div>
Application Directions	Rationale
<p>Apply/reapply wrap in the early morning, if possible.</p> <p>Wash or shower leg(s) with warm water using a pH-balanced skin cleanser. Moisturize intact skin with agency approved moisturizer; allow moisturizer to absorb/dry before wrapping.</p> <p>Measure the ankle circumference 10 cm from the bottom of the heel; measure the calf circumference 30 cm from the bottom of the heel.</p> <p>Apply an appropriate cover dressing if wound present.</p>	<p>Edema should be minimal in the morning</p> <p>To remove dead skin and resolve/prevent dry skin.</p> <p>This measurement gives a base-line assessment/re-assessment of the client's edema, as well as determines the ankle circumference:</p> <ul style="list-style-type: none"> • 18cm-26cm is considered normal • greater than 26cm are considered large • less than 18cm is considered small and requires additional padding



Skin and Wound Product Information Sheet

<p>Determine the size of the wrap needed (either 8cm, 10cm or 12cm wide) by holding the roll in front of the anterior ankle to obtain its width. If using two wraps, measure the first wrap in front of the ankle and measure the second wrap in front of the widest part of the anterior calf. Choose the wrap(s) that best matches ankle/calf measurements.</p> <p>Determine the number of wraps required by measuring the ankle circumference with a measuring tape. If the ankle measurement is greater than 26 cm, use 2 wraps or a 10m wrap; if it is 26cm or less, use 1 wrap or a 5m wrap (typically 2 wraps are required).</p>	
<p>To Apply</p>	
<p>Support the foot off the floor and position the foot in dorsiflexion with the calf muscle at rest.</p> <p>If using, measure the non-compression stockinette from the popliteal space of the knee down the toes and add 5cm to each end. Apply the stockinette with 5cm above the knee and beyond the toes.</p>	<p>Dorsiflexion ensures a good walking position once the wrap is on.</p> <p>The extra 5cm will be folded into the top and bottom of the padding material.</p>
<p>Starting at the base of the big toe, laterally unroll the cast padding /open cell foam padding in a spiral fashion from the base of the toes to just below the knee with a 50% overall lap.</p> <p>For champagne-bottle-shaped legs, use a layer of cast padding at the ankle to 'build-up' this area in line with the calf.</p>	<p>To prevent undue pressure over bony prominences. Open-cell foam padding may be helpful for lymph-edema legs that have folds or lobules as it provides a more even surface.</p> <p>Circumference of the leg must progressively increase proximally to ensure gradient compression.</p>
<p>Start at the medial metatarsal head, and using 100% stretch, wrap the compression layer once around the foot (from medial to lateral aspect). Repeat again to anchor bandage in place.</p> <p>Continue with a turn across the mid-foot then over the Achilles tendon. Take the wrap over the front aspect of the foot then from the medial to the lateral ankle thereby wrapping the entire foot.</p>	
<p>Spiral up the leg using a 100% stretch and a 50% overlap. Stop two finger widths below the knee.</p> <p>Spiral the excess wrap back down the leg <u>with no tension</u> and secure with tape. Do not trim off any excess wrap as this will cause fraying or wrap the excess in one area of leg as this will cause excessive pressure.</p> <p>If a second bandage is required wrap the second bandage starting at the ankle and wrapping in the opposite direction in a spiral fashion at 50% overlap.</p> <p>Complete the wrap by folding back the excess stockinette at the knee and toes.</p>	
<p>To Remove</p>	
<p>Remove by unwrapping.</p>	
<p>To Wash</p>	
<p>Hand wash with cold water and hang to dry. Client may need two sets of wraps to allow the alternate wraps to dry after washing.</p>	
<p>Frequency of Wrap Change</p>	
<ul style="list-style-type: none"> • May be left on up to 7 days given that slippage does not occur • May require daily reapplication during early stages of edema reduction due to slippage 	
<p>Expected Outcome</p>	
<p>Measurable improvement in the ankle and calf measurements within 1 week.</p>	

For further information, please contact your Wound Clinician.